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PATENT APPLICATION FEE DETERMINATION RECORD
Substitute for Form PTO-875

Application or Docket Number: **10/656 027**

CLAIMS AS FILED – PART I

Date: 5/25/03

	(Column 1)	(Column 2)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
FOR	NUMBER FILED	NUMBER EXTRA	RATE	FEE		RATE	FEE
BASIC FEE (37 CFR 1.16(a))				.375	OR		.770
TOTAL CLAIMS (37 CFR 1.16(c))	18	minus 20 = —	x 9		OR	x 18	
INDEPENDENT CLAIMS (37 CFR 1.16(b))	3	minus 3 = —	x 100		OR	x 200	
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d))			+ 180		OR	+ 310	
			TOTAL		OR	TOTAL	

* If the difference in column 1 is less than zero, enter "0" in column 2.

CLAIMS AS AMENDED – PART II

Date: 10/18/05 RCE

AMENDMENT A

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	18	Minus	20	—	x 25		OR	x 50	
Independent (37 CFR 1.16(b))	3	Minus	3	—	x 100		OR	x 200	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 180		OR	+ 360	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

AMENDMENT B

Date: 2/3/06

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	SMALL ENTITY RATE	ADDITIONAL FEE	OR	OTHER THAN SMALL ENTITY RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	18	Minus	20		x 25		OR	x 50	
Independent (37 CFR 1.16(b))	3	Minus	3		x 100		OR	x 200	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 180		OR	+ 360	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

AMENDMENT C

RCE 10/18/06

	(Column 1) CLAIMS REMAINING AFTER AMENDMENT		(Column 2) HIGHEST NUMBER PREVIOUSLY PAID FOR	(Column 3) PRESENT EXTRA	RATE	ADDITIONAL FEE	OR	RATE	ADDITIONAL FEE
Total (37 CFR 1.16(c))	18	Minus	20		x 25		OR	x 50	
Independent (37 CFR 1.16(b))	3	Minus	3		x 100		OR	x 200	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))					+ 180		OR	+ 360	
					TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.